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# The Peril Of Medicare For All

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They say time heals all wounds.

These words ring especially true as the Democratic Party, of which I proudly belong, debates the merits of Medicare for All. It has been nearly a decade since the Affordable

Care Act (ACA) became law, and I fear my party has too soon forgotten the bruising battle we fought to improve our nation's health care system.

Serving as a staff member on the House Energy and Commerce Committee's Health Subcommittee in 2010, I saw first-hand the debate surrounding the ACA before its passage.

For many members of Congress from conservative districts, supporting this landmark law was a profile in courage. They feared they would lose their next election but knew voting yes was the right thing to do. Indeed, those fears came true. Congressional Democrats were exiled to the political wilderness until they reclaimed the House majority in 2018.

With this not-so-distant history in mind, it's hard to understand the rationale for yet another battle over health care that will rip the country apart. I don't say this out of fear of the opposition or out of ignorance that our health care system requires reform. There are measures we must take to improve the quality, access, and affordability of health care in this country. However, we must do everything in our power to avoid such a divisive battle, when more incremental, evidence-based reforms could be implemented far more easily while achieving the same outcomes. We need not upend the entire health system for every American, as some suggest, to achieve these worthy goals.

## First Steps

First and foremost, we should undo much of the damage the Trump administration has inflicted on the ACA. The president and his aides have tried to undermine the law since their first day on the job. Fortunately, to its credit, the ACA has weathered these constant attacks.

The law remains intact, providing health care coverage to millions of Americans who might not otherwise have it. Recent reports show that the ACA insurance exchanges are not only stable, but that health insurers are [expanding their offerings](#) and monthly premiums are coming down.

Unfortunately, damage has still been done. The number of Americans without health insurance has increased since President Donald Trump took office. According to [data collected by Gallup](#), the country's uninsured rate has steadily ticked upward since 2016, rising from a low of 10.9 percent to 13.7 percent. The government's own [census data](#) shows roughly 27.5 million Americans didn't have health insurance at any point last year, an increase of roughly two million people from 2017.

This could be attributed to the [uncertainty](#) experienced by all stakeholders—insurers, state governments, and consumers—as the administration has implemented its destructive agenda. But there is a remedy.

House Democrats have already developed a [legislative package](#) to strengthen the ACA, make health care coverage more affordable, and reverse the harmful policies proposed and implemented by the Trump administration. This package would inject stability into the ACA Marketplaces by strengthening tax credits available to consumers, restoring reinsurance funds for insurers, and prohibiting the sale of junk health plans. Implementing these and other reforms in 2021 would put us back on a positive trajectory to reducing the uninsured and improving affordability.

## Additional Opportunities

There are other substantive measures we ought to consider that would improve the system, without imploding it.

1. Allow adults ages 50–65 to buy into Medicare, as Senators Debbie Stabenow (D-MI) and Tammy Baldwin (D-WI) have [proposed](#). This kind of policy could potentially improve the risk pool and lower costs for both the ACA exchanges as well as Medicare, and it demonstrates how policy makers from places Democrats lost ground in during the 2016 election are advocating for smart, incremental, and impactful reforms.
2. Work with states to expand their Medicaid populations. To date, 36 states plus the District of Columbia have adopted the Medicaid expansion, and 14 states have not. There are [clear benefits](#) to expansion, including lower uninsured rates, improved access to care, and financial security among the low-income population. Multiple [studies](#) have also shown state budget savings, revenue gains, and overall economic growth from expanding Medicaid.
3. Provide relief to the 153 million Americans who receive their health care at the workplace. [A recent survey by the Henry J. Kaiser Family Foundation](#) found that in 2019 the average annual premium to cover a family through work was \$20,576, and \$7,188 for an individual. The survey found that the average premium for family coverage has increased 22 percent over the past five years and 54 percent over the past 10 years, significantly more than either workers' wages or inflation. This is not sustainable. It may be time to consider ideas such as a national reinsurance program for employer-sponsored health care.

## Other Pressing Needs

Finally, the case against Medicare for All does not rest solely on the notion that it will wreak political havoc or that there are more moderate, less disruptive approaches to improve our health care system.

It is also important to note the other pressing needs the nation must address in health care, as well as other policy arenas. The opioid crisis is still ravaging US families, our country's infrastructure is crumbling, the earth is warming at a catastrophic rate, and our democracy continues to be attacked by foreign adversaries. Attempting to enact Medicare for All with little chance of success will likely foreclose the opportunity for progress on any of these other policies.

Improbable, sweeping reforms of this nature will set us back in the long run. The chances of them coming to fruition are slim, yet they would cost precious time and political capital in the attempt to enact them. We would be much better off taking a more incremental, pragmatic approach that can deliver real results. Consistent small wins add up to big changes at the end of the day.

## Author's Note

Clark does consultant work for an association of nonprofit health insurance plans. No funding was provided by this association and no coordination/communication has occurred between the association and the author regarding the content of this piece. The view is solely his own.

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**Aaron Katz** • 24 days ago

Clark's criticism of Medicare for All misses the point. If we want an opportunity to move the US closer to an efficient, effective health care system in which people get the care they need when they need it without going broke, we will need someone in the White House who's committed to do so. A candidate who promises "a little bit better" or "just give me a few more decades" is not going to energize enough voters to the polls to beat Trump. We need bold ideas on the front end to win the election if we have any hope of moving a responsible health policy agenda. Medicare for All is such a bold idea; when we have a progressive occupant of the White House is the time to debate it and alternatives.

1 ^ | v • Reply • Share ›



**Mark Wrede** • 25 days ago

How could anyone imagine that sustaining a system of multiple providers would produce anything but a bloated and inefficient system by the designs of its private financiers? Medicare for All is a slogan expressing the only hope by a known, working system of relieving the morbid obesity of American systems of payment for providing health care.

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**Ted Doolittle -- Connecticut S** • 25 days ago • edited

Agree with Roy Goldman to the extent he is saying insurance companies (specifically large numbers of expertise-laden employees) will be needed to help run any Medicare expansion.

Also, while a number of the improvement plans are workable and realistic, there is a strong case to be made that even Medicare for All (full-blown Sanders/Jayapal) would be clearly a lift, but not as disruptive or dangerous to the insurance companies as they are publicly saying. For them, Medicare for All would be a nice fall-back Plan B from their first preference of sticking with the status quo.

See my two earlier pieces on this theme (more to come, I hope):

<https://thehill.com/opinion...>

<https://thehill.com/opinion...>

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Chris • 25 days ago

Medicare for All or you can't get my vote.

^ | v • Reply • Share ›



David P. Lind • a month ago

At no point did I read the attempt to reduce/eliminate the massive waste baked within our existing healthcare 'system.' Finding ways to simplify administrative complexity is an absolute 'must' if we are to make ""incremental and pragmatic" changes to a bloated and inefficient system. Multiple private and public strategies will be required to reduce at least a fraction of the waste plaguing our 'system.' Otherwise, we will continue to pay a surcharge of 20 to 47 percent devoted to waste.

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Roger Howe • 25 days ago

Thank you, Mr. Clark. I have been an incrementalist regarding healthcare reform since before President Obama received the Democratic nomination. The reasons given are true and partial. Healthcare is a complex system imbedded in the complex web of our society. Complex systems cannot be "fixed" with simple solutions. "Medicare for All" in a literal sense will put extraordinary stresses on a system that is already stressed to do what it does, and lacks expertise in many aspects of health/medical care, such as obstetrics and pediatrics. Resolving problems of how much private insurance companies pay for medical services under the fee-for-service system in which almost all of them still operate is still a problem. Resolving issues regarding the high cost of pharmaceuticals is a must. Addressing issues around professional liability will be an important component



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